



# Signature Cure Form



**The signature on your ballot envelope does not appear to match a signature in your voter registration record.** We want to make sure your vote counts. Please choose one of the ways listed below to cure your signature challenge.

## Ways to cure your signature challenge

**!** We must receive your response no later than **Thursday, February 19 at 4pm.**

**Option 1.** Sign and return this form. Your signature on this form must match the signature on your ballot envelope for your ballot to count. *OR*

**Option 2.** Contact us with your full Washington state driver's license number or state identity card number. *OR*

**Option 3.** Contact us with the last 4 digits of your social security number. *OR*

**Option 4.** Provide us a copy of **one** of the following:

- photo ID
- valid enrollment card of a federally recognized Tribe in Washington state
- copy of a current utility bill or current bank statement
- copy of a current government check
- copy of a current paycheck
- copy of a government document (other than a voter registration card) that shows your name and address

## How to return this form

### Option 1: electronically

Take a picture and email it to us!  
iVote@co.yakima.wa.us

### Option 2: by mail

Yakima County Elections  
PO Box 12570  
Yakima WA 98909

### Option 3: in person

Yakima County Elections  
128 N 2nd St Room 117, Yakima

## Contact us

phone: 509.574.1340 or 1.800.833.0569

email: iVote@co.yakima.wa.us

The signature you provide will be added to your voter registration record.

## 1. Fill out your voter information

first name \_\_\_\_\_ middle \_\_\_\_\_ last name \_\_\_\_\_

date of birth \_\_\_\_\_ phone (optional) \_\_\_\_\_ email (optional) \_\_\_\_\_

## 2. Read the ballot declaration and voter oath

I do solemnly swear or affirm under penalty of perjury that I am: A United States citizen; A Washington state resident; At least 18 years old on election day, or 17 years old at the primary and 18 years old by the day of the November general election; Voting only once in this election and not voting in any other United States jurisdiction; Not serving a sentence of total confinement under the jurisdiction of the Department of Corrections for a Washington felony conviction or currently incarcerated for a federal or out-of-state felony conviction; Not disqualified from voting due to a court order; Aware it is illegal to forge a signature or cast another person's ballot and that attempting to vote when not qualified, attempting to vote more than once, or falsely signing this declaration is a felony punishable by a maximum imprisonment of five years, a maximum fine of \$10,000, or both; and Aware that the signature on this declaration will be compared to the signature(s) in the voter's registration file.

### voter oath

I declare that the facts on this voter registration form are true. I am a citizen of the United States, I am a Washington state resident, and I am at least sixteen years old. I am not disqualified from voting due to a court order, and I am not currently serving a sentence of total confinement under the jurisdiction of the department of corrections for a Washington felony conviction, and I am not currently incarcerated for a federal or out-of-state felony conviction.

## 3a. Sign and date

By signing below or by providing ID, you are confirming that you were the one who voted and signed the ballot envelope. **Power of Attorney cannot be used to sign for someone else.**

**X**

signature of voter (required)

date

please print your name here

If you are unable to write your signature, make a mark on the *signature of voter* line above. Two people must witness your mark and sign below.

signature of witness 1 & date

signature of witness 2 & date

## 3b. OR provide another way to verify your identity

OR  
Driver's License, driver's permit or state ID number

Last 4 of SSN

OR provide us a copy of one of the documents listed on this form